CALFRESH (CF) PROGRAM REQUEST FOR POLICY/REGULATION INTERPRETATION

INSTRUCTIONS: Complete items 1 - 10 on the form. Use a separate form for each policy interpretation request. If additional space is needed, please use the second page. Be sure to identify the additional discussion with the appropriate number and heading. Retain a copy of the CF 24 for your records.

- Questions from counties, including county Quality Control, must be submitted by the county CalFresh Coordinator and may be submitted directly to the CalFresh Policy analyst assigned responsibility for the county, with a copy directed to the appropriate CalFresh Policy unit manager.
- Questions from Administrative Law Judges may be submitted directly to the CalFresh Policy analyst assigned responsibility to the county

	where the hearing took place, with a copy of the form directed to the	пе ар	propriate CaiFresh Bureau u	nit manager.	
1.	RESPONSE NEEDED DUE TO:	5.	DATE OF REQUEST:	NEED RESPONSE BY:	
	☐ Policy/Regulation Interpretation		8/13/15	8/21/15	
	□ QC	6.	COUNTY/ORGANIZATION:	·	
	☐ Fair Hearing		Solano County		
	✓ Other:	7.	SUBJECT:		
			MCE/IRT Status/Over Is		
2.	REQUESTOR NAME:	8.	REFERENCES: (Include ACL/AC NOTE: All requests must have a	IN, court cases, etc. in references) a regulation cite(s) and/or a reference(s).	
3.	PHONE NO.:		ACL 14-56, ACIN I-50-1	3	
4.	REGULATION CITE(S):				
9.	QUESTION: (INCLUDE SCENARIO IF NEEDED FOR CLARITY):				
	HH's failure to report income or new HH members when recis generally discovered after the fact and may impact several Question: When it is discovered that the NACF HH failed to MCE status be removed retroactively and the HH be held to computation? If MCE status is removed retroactively, would	mak 130	or mandatory reports. e prior mandatory reports % gross income limitation	of income or HH changes, will the vs. 200% for purposes of the OI	
10.	REQUESTOR'S PROPOSED ANSWER:				
	MCE status is not removed retroactively.			. :	

11. STATE POLICY RESPONSE (CFPB USE ONLY):

CDSS concurs with the proposed response.

	FOR CDSS USE	
DATE RECEIVED:	DATE RESPONDED TO COUNTY/ALJ:	
08/13/15	0/14/15	